PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 0968143/

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS 49							RA ⁻	TF	FEE	l I	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC		···-	OΒ	BASIC FEE	
		DIE CLAIMS	. ()				-					
TOTAL CHARGEABLE CLAIMS			4 9 minus 20=		 		X\$	9= 		OR	X\$18=	522
INDEPENDENT CLAIMS				nus 3 =	3		X4)= 		OR	X80=	240
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+13	5=		OR	+270=	·
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOT	AL		OR	TOTAL	1479
CLAIMS AS AMENDED					- PART II						OTHER THAN	
		(Column 1) CLAIMS	(Colum HIGHE			(Column 3)	SMA	SMALL ENTITY		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	MBER HOUSLY FOR	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***	T 01 4114	=	X4)=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							5=		OR	+270=	
								OTAL FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	:
	Independent	*	Minus	***		=	X4)=		OR	X80=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
								5=		OR	+270=	
								FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)	1					
AMENDMENT C	0	CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u> </u>	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
ME.	Independent	*	Minus	***		=	X40)=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
						l., 0	+13	5=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
l "		ımber Previously f nber Previously Pa							propriate bo	x in co	olumn 1.	